PTO/SB/17 (12-04)

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Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known ant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/749,484 TRANSMIT Filing Date December 31, 2003 First Named Inventor Mathew G. Pelletier V. Nguyen **Examiner Name** 2858 Applicant claims small entity status, See 37 CFR 1.27 Art Unit TOTAL AMOUNT OF PAYMENT \$120.00 0004.04 Attorney Docket No. METHOD OF PAYMENT (check all that apply) ☐ Credit Card ☐ Money Order ☐ Check ☐ None Other (please identify): Deposit Account Deposit Account Number: 50-2132 Deposit Account Name: USDA-ARS-OTT For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity Small Entity Application Type Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee(\$) Fee (\$) Fee (\$) 300 150 500 250 200 100 Utility 65 130 Design 200 100 100 50 80 Plant 200 100 300 150 160 250 600 300 Réissue 300 150 500 Provisional 200 100 0 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 100 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 180 Multiple dependent claims 360 Multiple Dependent Claims Fee Paid (\$) **Total Claims** Fee (\$) - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = X HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) **Total Sheets Extra Sheets** - 100 = (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) 120.00 Other: 1 month Extension SUBMITTED BY Registration No. 34,078 Telephone: 309/681-6515 Signature (Attorney/Agent) RANDALL EXDECK Date February 24, 2006 Name (Print/Type)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Child Information Officer, U.S. Petant and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 2213-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for large the form, call 1-800-PTO-9199 and select opt